

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

WOMEN SPEAK OUT PAC

ADDRESS (number and street)

2776 S. Arlington Mill Dr.

Check if different
than previously
reported. (ACC)

PO Box 803

Arlington

VA

22206

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00530766

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
09 01 2022

through

M M M / D D D / Y Y Y Y Y Y
09 30 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Gross, Jennifer, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Gross, Jennifer, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 20 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

WOMEN SPEAK OUT PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 09 / 01 / 2022

To:

 M M / D D / Y Y Y Y Y
 09 / 30 / 2022

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2022		546135.12
(b) Cash on Hand at Beginning of Reporting Period.....	6133380.44	
(c) Total Receipts (from Line 19)	929063.80	6926480.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	7062444.24	7472615.12
7. Total Disbursements (from Line 31).....	1742813.57	2152984.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	5319630.67	5319630.67
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	242503.30	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

WOMEN SPEAK OUT PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
09	/	01	/	2022

To:

M M	/	D D	/	Y Y Y Y
09	/	30	/	2022

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

699451.42

2270685.31

(ii) Unitemized

346.00

2648.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

699797.42

2273333.31

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

218889.00

4532223.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

918686.42

6805556.31

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

97146.50

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

10377.38

23777.19

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

929063.80

6926480.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

929063.80

6926480.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	375772.64	426005.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	375772.64	426005.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	1211786.40	1275753.08
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	155254.53	451226.37
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1742813.57	2152984.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1742813.57	2152984.45

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	918686.42	6805556.31
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	918686.42	6805556.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	375772.64	426005.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	97146.50
38. Net Operating Expenditures (subtract Line 37 from Line 36)	375772.64	328858.50

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 82

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Borchert, Steven, , ,

Mailing Address 1706 Whitby Avenue

City
PortageState
MIZip Code
49024-2552FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA11AI.43598

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Brochu, David, , ,

Mailing Address 410 Flagship Dr Apt 601

City
NaplesState
FLZip Code
34108-4312FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HomemakerOccupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA11AI.43579

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chesmore, Greg, A., ,

Mailing Address 5018 Flambeau Road

City
MadisonState
WIZip Code
53705-1302FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Acceleron PharmaOccupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2022

Transaction ID : SA11AI.43628

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

2025.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 82
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Costello, Daniel, , ,

Mailing Address 69 Waverly Ave.

City
Clarendon Hills

State
IL

Zip Code
60514-1236

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of Notre Dame

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA11AI.43585

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DeMott, John, , ,

Mailing Address 745 Spyglass Hill

City
Holland

State
MI

Zip Code
49424-2285

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2022

Transaction ID : SA11AI.43602

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dobrzanski, Frank, , ,

Mailing Address 312 Altavista Loop

City
Jacksonville

State
NC

Zip Code
28546-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Expedient Resource Services

Occupation (for Individual)
Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2022

Transaction ID : SA11AI.43611

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25650.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 82

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Donovan, Charles, , ,

Mailing Address 5394 Palisades Dr

City
CincinnatiState
OHZip Code
45238-5616FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2022

Transaction ID : SA11AI.43614

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Endres, Stephen, , ,

Mailing Address 105 Charmuth Road

City
LuthervilleState
MDZip Code
21093-5209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Emory HillOccupation (for Individual)
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA11AI.43595

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Estruth, Nathan, , ,

Mailing Address 9378 South Mason Montgomery Road #

City
MasonState
OHZip Code
45040-8827FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Proctor & Gamble Future WorksOccupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 29 / 2022

Transaction ID : SA11AI.43618

Amount of Each Receipt this Period

10000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

10285.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 82

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garcia, Ivan, , ,

Mailing Address 11909 Minor Jones Drive

City

Owings Mills

State

MD

Zip Code

21117-1536

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Physician

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA11AI.43596

Amount of Each Receipt this Period

5000.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gruber, Lori, , ,

Mailing Address 123 Memorial Drive NW, PO Box 65

City

Hoffman

State

MN

Zip Code

56339-0065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Information requested per best efforts

Occupation (for Individual)

Information requested per best efforts

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2022

Transaction ID : SA11AI.43606

Amount of Each Receipt this Period

5000.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hanson, David, , ,

Mailing Address 1501 South Louisiana Avenue

City

Mason City

State

IA

Zip Code

50401-6988

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

60000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2022

Transaction ID : SA11AI.43592

Amount of Each Receipt this Period

30000.00



Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

40000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 82

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hegeman, Carmen, B., ,

Mailing Address 809 La Cruz Drive

City
El PasoState
TXZip Code
79902-1720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2022

Transaction ID : SA11AI.43621

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Herrema, Justin, , ,

Mailing Address 1943 Porter Street Southwest

City
WyomingState
MIZip Code
49519-2220FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Information requested per best efforts

Occupation (for Individual)

Information requested per best efforts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2022

Transaction ID : SA11AI.43599

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. James, Virginia, , ,

Mailing Address P.O. Box 60

City
LambertvilleState
NJZip Code
08530-0060FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Private Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

484583.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2022

Transaction ID : SA11AI.43681

Amount of Each Receipt this Period

563960.00

☒ Memo Item

In-kind - Stock Received

SUBTOTAL of Receipts This Page (optional).....▶

135.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. James, Virginia, , ,

Mailing Address P.O. Box 60

City
Lambertville

State
NJ

Zip Code
08530-0060

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Private Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040056.89

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2022

Transaction ID : SA11AI.43607

Amount of Each Receipt this Period

555473.00

☐ Memo Item
☐ Stock Liquidation

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jessen, Thomas, , ,

Mailing Address 469 Amhurst Road

City
Valparaiso

State
IN

Zip Code
46385-8030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Perma-Green Supreme Inc.

Occupation (for Individual)
Businessman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2022

Transaction ID : SA11AI.43587

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Keesling, Marcia, W., ,

Mailing Address 1322 Longs Point

City
Woodland Park

State
CO

Zip Code
80863-5306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2022

Transaction ID : SA11AI.43575

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

561473.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kelly, Craig, , ,

Mailing Address 6032 Connerly Dr

City
Dallas

State
TX

Zip Code
75205-1749

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
information requested per best efforts

Occupation (for Individual)
information requested per best efforts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2022

Transaction ID : SA11AI.43623

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Koon, Edward, , ,

Mailing Address 4381 Leonard Street

City
Coopersville

State
MI

Zip Code
49404-9610

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Universal Appraisers

Occupation (for Individual)
Appraiser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2022

Transaction ID : SA11AI.43600

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lereche, Margaret, , ,

Mailing Address 2025 Lakewinds Drive

City
Reston

State
VA

Zip Code
20191-4028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
information requested per best efforts

Occupation (for Individual)
information requested per best efforts

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2022

Transaction ID : SA11AI.43627

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5035.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 82

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Liotti, Dan, , ,

Mailing Address 8827 Spinnaker Court

City
IndianapolisState
INZip Code
46256-9523FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 16 / 2022

Transaction ID : SA11AI.43588

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Manor, Beth, , ,

Mailing Address P.O. Box 833

City
ChautauquaState
NYZip Code
14722-0833FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2022

Transaction ID : SA11AI.43689

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Marrella, Amey, , ,

Mailing Address P.O. Box 4065

City
WoodbridgeState
CTZip Code
06525-0065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2022

Transaction ID : SA11AI.43577

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

7000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 82

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Martelli, Charles, , ,

Mailing Address 5591 Gallery Park Drive

City

Ann Arbor

State

MI

Zip Code

48103-5055

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Information requested per best efforts

Occupation (for Individual)

Information requested per best efforts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2022

Transaction ID : SA11AI.43601

Amount of Each Receipt this Period

220.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mooney, Martin, , ,

Mailing Address 5591 Squirrel Run Lane

City

Cincinnati

State

OH

Zip Code

45247-3616

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Frost Brown Todd

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2022

Transaction ID : SA11AI.43616

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Murnane, John, , ,

Mailing Address 10 Marian Place

City

Millwood

State

NY

Zip Code

10546-1135

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Fitzpatrick Cella Harper and Scinto

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2022

Transaction ID : SA11AI.43610

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

6220.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Norkus, Jeff, , ,

Mailing Address 20 Eagle Claw Drive

City
Hilton Head Island

State
SC

Zip Code
29926-1853

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2022

Transaction ID : SA11AI.43620

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rakunas, Lawrence, , ,

Mailing Address 1150 Willowgate Lane

City
Saint Charles

State
IL

Zip Code
60174-4143

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2022

Transaction ID : SA11AI.43584

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Snellink, Tom, , ,

Mailing Address 4001 Burton Street Southwest

City
Walker

State
MI

Zip Code
49534-6675

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2022

Transaction ID : SA11AI.43604

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11500.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 82

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stith, Richard, , ,

Mailing Address 812 Brown Street

City

Valparaiso

State

IN

Zip Code

46383-5855

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2022

Transaction ID : SA11AI.43589

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Trinko, Thomas, , ,

Mailing Address 112 S Stone Ave

City

La Grange

State

IL

Zip Code

60525-2252

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lockheed Martin

Occupation (for Individual)

Physicist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2022

Transaction ID : SA11AI.43683

Amount of Each Receipt this Period

9800.05

☒ Memo Item

In-kind - Stock Received

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Trinko, Thomas, , ,

Mailing Address 112 S Stone Ave

City

La Grange

State

IL

Zip Code

60525-2252

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lockheed Martin

Occupation (for Individual)

Physicist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

9928.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2022

Transaction ID : SA11AI.43583

Amount of Each Receipt this Period

9928.42

☐ Memo Item

Stock Liquidation

SUBTOTAL of Receipts This Page (optional).....▶

19928.42

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 82

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Walsh, Thomas, , ,

Mailing Address 3438 Lufberry Avenue

City
WantaghState
NYZip Code
11793-3057FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Merrill Lynch

Occupation (for Individual)

Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2022

Transaction ID : SA11AI.43608

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Yochum, Tim, , ,

Mailing Address 700 N University Dr

City
Fort WorthState
TXZip Code
76114-2333FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Go Power Sports

Occupation (for Individual)

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2022

Transaction ID : SA11AI.43624

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

10200.00

TOTAL This Period (last page this line number only).....▶

699451.42

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 82
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RESTORATION PAC

Mailing Address 1901 BUTTERFIELD ROAD
STE. 120

City
DOWNERS GROVE

State
IL

Zip Code
60515

FEC ID number of contributing
federal political committee.

C C00571588

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4532223.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2022

Transaction ID : SA11C.43574

Amount of Each Receipt this Period

218889.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

218889.00

218889.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Federated Hermes International

Mailing Address 1001 Liberty Avenue

City
Pittsburgh

State
PA

Zip Code
15222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

23777.19

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2022

Transaction ID : SA17.43374

Amount of Each Receipt this Period

10377.38

☐ Memo Item
Interest Income

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10377.38

10377.38

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. All Seasons Strategies, LLC

Mailing Address P.O. Box 3521

City
SpokaneState
WAZip Code
99202Purpose of Disbursement
National Director Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2022

FEC Identification Number

C**Transaction ID : SB21B.43696**

Amount of Each Disbursement this Period

10500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American ExpressMailing Address Three World Financial Center
200 Vesey StreetCity
New YorkState
NYZip Code
10285Purpose of Disbursement
Credit Card Payment - See Below

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2022

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

48016.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2022

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

19794.24

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

58516.90

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address 1030 Delta Blvd

City
Atlanta

State
GA

Zip Code
30354

Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 29 / 2022

FEC Identification Number

C

Transaction ID : SB21B.43524

Amount of Each Disbursement this Period

540.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Federal Express

Mailing Address 3875 Airways Blvd

City
Memphis

State
TN

Zip Code
38116

Purpose of Disbursement
Shipping Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 29 / 2022

FEC Identification Number

C

Transaction ID : SB21B.43524

Amount of Each Disbursement this Period

26.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd

City
Atlanta

State
GA

Zip Code
30354

Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 28 / 2022

FEC Identification Number

C

Transaction ID : SB21B.43524

Amount of Each Disbursement this Period

12320.10

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Thrifty Car Rental

Mailing Address 1534 Sunset Blvd

City
Steubenville

State
OH

Zip Code
43952

Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 27 / 2022

FEC Identification Number

C

Transaction ID : SB21B.43524

Amount of Each Disbursement this Period

162.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Cubesmart

Mailing Address 2101 Rock Spgs

City
Las Vegas

State
NV

Zip Code
89128

Purpose of Disbursement
Storage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 26 / 2022

FEC Identification Number

C

Transaction ID : SB21B.43524

Amount of Each Disbursement this Period

244.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Thrifty Car Rental

Mailing Address 1534 Sunset Blvd

City
Steubenville

State
OH

Zip Code
43952

Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 26 / 2022

FEC Identification Number

C

Transaction ID : SB21B.43524

Amount of Each Disbursement this Period

415.14

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

376.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

4213.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

225.98

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354Purpose of Disbursement
Travel

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2022

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

540.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Federal Express

Mailing Address 3875 Airways Blvd

City
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping Fee

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2022

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

51.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Prime Storage

Mailing Address 1155 Powers Fry PL SE

City
MariettaState
GAZip Code
30067Purpose of Disbursement
Storage

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2022

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

275.63

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Federal Express

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	2	2		

Mailing Address 3875 Airways Blvd

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

143.59

☒ Memo ItemCity
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping Fee

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	2	2		

Mailing Address 2702 Love Field Dr

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

639.96

☒ Memo ItemCity
DallasState
TXZip Code
75235Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Thrifty Car Rental

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	2	2		

Mailing Address 1534 Sunset Blvd

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

305.35

☒ Memo ItemCity
SteubenvilleState
OHZip Code
43952Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Federal Express

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	2	2		

Mailing Address 3875 Airways Blvd

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

35.47

☒ Memo ItemCity
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping FeeCategory/
Type

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Town Place Suites

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	2	2		

Mailing Address 231 Westside Square Dr

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

304.47

☒ Memo ItemCity
MercerState
PAZip Code
16137Purpose of Disbursement
TravelCategory/
Type

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. American Airlines

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	2	2		

Mailing Address 4333 Amon Carter Blvd

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

307.10

☒ Memo ItemCity
Fort WorthState
TXZip Code
76155Purpose of Disbursement
TravelCategory/
Type

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Federal Express

Mailing Address 3875 Airways Blvd

City
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping Fee

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

163.16

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Hotels.com

Mailing Address 2401 Wilson Blvd

City
ArlingtonState
VAZip Code
22201Purpose of Disbursement
Travel

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

382.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235Purpose of Disbursement
Travel

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

539.96

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 OF 82

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Thrifty Car Rental

Mailing Address 1534 Sunset Blvd

City
Steubenville

State
OH

Zip Code
43952

Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 15 / 2022

FEC Identification Number

C Transaction ID : SB21B.43524

Amount of Each Disbursement this Period

112.23

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Hillsdale College

Mailing Address 33 East College St

City
Hillsdale

State
MI

Zip Code
49242

Purpose of Disbursement
Event Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 14 / 2022

FEC Identification Number

C Transaction ID : SB21B.43524

Amount of Each Disbursement this Period

332.84

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort Worth

State
TX

Zip Code
76155

Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 12 / 2022

FEC Identification Number

C Transaction ID : SB21B.43524

Amount of Each Disbursement this Period

458.60

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Thrifty Car Rental

Mailing Address 1534 Sunset Blvd

City
SteubenvilleState
OHZip Code
43952Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2022

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

472.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. i360

Mailing Address P.O. Box 37046

City
BaltimoreState
MDZip Code
21297-3046Purpose of Disbursement
Data Subscription Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		03		2022

FEC Identification Number

C**Transaction ID : SB21B.43524**

Amount of Each Disbursement this Period

4000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Marketing & Publishing, Inc.

Mailing Address 2012 Stonewater Ct

City
HoschtonState
GAZip Code
30548Purpose of Disbursement
to record pymt made against debt-See Schedule E for details

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2022

FEC Identification Number

C**Transaction ID : SB21B.43664**

Amount of Each Disbursement this Period

111375.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

111375.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. American Marketing & Publishing, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2022

Mailing Address 2012 Stonewater Ct

City
HoschtonState
GAZip Code
30548Purpose of Disbursement
to record pymt made against debt-See Schedule E for details

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.43665**

Amount of Each Disbursement this Period

- 111375.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AM Solutions

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2022

Mailing Address 100 Interstate Blvd

City
EdgertonState
WIZip Code
53534Purpose of Disbursement
Postage

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.43654**

Amount of Each Disbursement this Period

811.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Anedot, Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2022

Mailing Address 1340 Poydras Street
Suite 1770City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.43655**

Amount of Each Disbursement this Period

1031.54

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 109531.57

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Blackbaud

Mailing Address 65 Fairchild Street

City
CharlestonState
SCZip Code
29492Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2022

FEC Identification Number

C**Transaction ID : SB21B.43660**

Amount of Each Disbursement this Period

172.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Collins, Cayla, , ,Mailing Address 2800 Shirlington Road
Suite 1200City
ArlingtonState
VAZip Code
22206Purpose of Disbursement
Travel / Food/Beverage / Postage (All Below Threshold)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2022

FEC Identification Number

C**Transaction ID : SB21B.43415**

Amount of Each Disbursement this Period

224.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cygnal

Mailing Address 900 17th St NW

City
WashingtonState
DCZip Code
20006Purpose of Disbursement
Polling - KY (Non-IE)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		06		2022

FEC Identification Number

C**Transaction ID : SB21B.43691**

Amount of Each Disbursement this Period

13700.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

14096.74

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 OF 82

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Denton US LLP

Mailing Address 1900 K Street NW

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement
Legal Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 07 / 2022

FEC Identification Number

C

Transaction ID : SB21B.43371

Amount of Each Disbursement this Period

2625.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Evolving Strategies

Mailing Address 3125 1st Place North

City
Arlington

State
VA

Zip Code
22201

Purpose of Disbursement
Polling - GA (Non-IE)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2022

FEC Identification Number

C

Transaction ID : SB21B.43693

Amount of Each Disbursement this Period

48300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ewing, Mollie, , ,

Mailing Address 2800 Shirlington Road
Suite 1200

City
Arlington

State
VA

Zip Code
22206

Purpose of Disbursement
Travel / Food/Beverage (All Below Threshold)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2022

FEC Identification Number

C

Transaction ID : SB21B.43442

Amount of Each Disbursement this Period

162.22

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51087.22

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Fadool, David, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2022

Mailing Address 2800 Shirlington Road, Ste 1200

City
ArlingtonState
VAZip Code
22206Purpose of Disbursement
Travel / Printing (All Below Threshold)

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB21B.43398**

Amount of Each Disbursement this Period

116.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FP1 Strategies, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2022

Mailing Address 3001 Washington Blvd
7th FloorCity
ArlingtonState
VAZip Code
22201Purpose of Disbursement
National Director Pay

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB21B.43695**

Amount of Each Disbursement this Period

13500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Headway Workforce Solutions Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2022

Mailing Address 3100 Smoketree Ct.
Suite 900City
RaleighState
NCZip Code
27604Purpose of Disbursement
Prepayment of National Support Staff Salary

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2022

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB21B.43658**

Amount of Each Disbursement this Period

184437.92

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

198054.82

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Mann, Joanne, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2022

Mailing Address 2800 Shirlington Road
Ste 1200City
ArlingtonState
VAZip Code
22206Purpose of Disbursement
Travel / Food/Beverage / Office Supplies (All Below Threshold)

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.43426**

Amount of Each Disbursement this Period

178.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Merrill Lynch

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2022

Mailing Address 200 Park Ave
13th FloorCity
New YorkState
NYZip Code
10166Purpose of Disbursement
Broker Fee For Stock Sold (T. Trinko)

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.43630**

Amount of Each Disbursement this Period

97.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Merrill Lynch

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2022

Mailing Address 200 Park Ave
13th FloorCity
New YorkState
NYZip Code
10166Purpose of Disbursement
Broker Fee For Stock Sold (V. James)

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.43632**

Amount of Each Disbursement this Period

2243.72

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2519.44

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. N.C. VALUES COALITIONMailing Address 9650 STICKLAND RD
STE 103-226City
RALEIGHState
NCZip Code
27615Purpose of Disbursement
State Director Pay

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	01	/	2022

FEC Identification Number

C C90014556**Transaction ID : SB21B.43700**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Phillips, Kyle, , ,Mailing Address 2800 Shirlington Road
Suite 1200City
ArlingtonState
VAZip Code
22206Purpose of Disbursement
Travel / Food/Beverage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	21	/	2022

FEC Identification Number

C**Transaction ID : SB21B.43404**

Amount of Each Disbursement this Period

431.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Phillips, Kyle, , ,Mailing Address 2800 Shirlington Road
Suite 1200City
ArlingtonState
VAZip Code
22206Purpose of Disbursement
Mileage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	17	/	2022

FEC Identification Number

C**Transaction ID : SB21B.43404**

Amount of Each Disbursement this Period

71.40

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5431.35

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Phillips, Kyle, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2022

Mailing Address 2800 Shirlington Road
Suite 1200City
ArlingtonState
VAZip Code
22206Purpose of Disbursement
Mileage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.43404**

Amount of Each Disbursement this Period

71.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Short, Catherine, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2022

Mailing Address 2800 Shirlington Road
Ste 1200City
ArlingtonState
VAZip Code
22206Purpose of Disbursement
Travel / Food/Beverage / Printing

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.43453**

Amount of Each Disbursement this Period

502.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Staples

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2022

Mailing Address 500 Staples Dr

City
FraminghamState
MAZip Code
01702Purpose of Disbursement
Printing

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.43453**

Amount of Each Disbursement this Period

204.18

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

502.11

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 82

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Smith, Jodi, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2022

Mailing Address 2800 Shirlington Rd

City
ArlingtonState
VAZip Code
22206Purpose of Disbursement
State Director Pay

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB21B.43699**

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Lukens Company

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2022

Mailing Address 2800 Shirlington Rd

City
ArlingtonState
VAZip Code
22206Purpose of Disbursement
Fundraising Mailer

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB21B.43633**

Amount of Each Disbursement this Period

8391.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Trace Strategies, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2022

Mailing Address 11104 Westpoint Court

City
Litte RockState
ARZip Code
72211Purpose of Disbursement
State Director Pay

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB21B.43697**

Amount of Each Disbursement this Period

12000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

28391.22

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 OF 82

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Usio, Inc.

Mailing Address 3611 Paesanos Pkwy, Suite 300

City
San Antonio

State
TX

Zip Code
78213

Purpose of Disbursement
Pre-Paid Debit Card - Memo items will be provided as expenses occur

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 16 / 2022

FEC Identification Number

C

Transaction ID : SB21B.43480

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Usio, Inc.

Mailing Address 3611 Paesanos Pkwy, Suite 300

City
San Antonio

State
TX

Zip Code
78213

Purpose of Disbursement
Gift Card Prizes

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 16 / 2022

FEC Identification Number

C

Transaction ID : SB21B.43653

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15000.00

375443.23

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 82

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. American Marketing & Publishing, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2022

Mailing Address 2012 Stonewater Ct

City
HoschtonState
GAZip Code
30548Purpose of Disbursement
Non-Federal Door Hangers- FL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB29.43635**

Amount of Each Disbursement this Period

16875.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Marketing & Publishing, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2022

Mailing Address 2012 Stonewater Ct

City
HoschtonState
GAZip Code
30548Purpose of Disbursement
Non-Federal- Door Hangers- AZ

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB29.43637**

Amount of Each Disbursement this Period

16875.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Marketing & Publishing, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2022

Mailing Address 2012 Stonewater Ct

City
HoschtonState
GAZip Code
30548Purpose of Disbursement
Non-Federal Door Hangers- GA

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB29.43640**

Amount of Each Disbursement this Period

13500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 82

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. American Marketing & Publishing, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2022

Mailing Address 2012 Stonewater Ct

City
HoschtonState
GAZip Code
30548Purpose of Disbursement
Non-Federal Door Hangers-NV

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB29.43641**

Amount of Each Disbursement this Period

10125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Marketing & Publishing, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2022

Mailing Address 2012 Stonewater Ct

City
HoschtonState
GAZip Code
30548Purpose of Disbursement
Non-Federal Door Hangers- PA

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB29.43643**

Amount of Each Disbursement this Period

20250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Marketing & Publishing, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2022

Mailing Address 2012 Stonewater Ct

City
HoschtonState
GAZip Code
30548Purpose of Disbursement
Non-Federal Door Hangers- WI

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB29.43645**

Amount of Each Disbursement this Period

6750.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

37125.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 82

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Headway Workforce Solutions Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2022

Mailing Address 3100 Smoketree Ct.
Suite 900City
RaleighState
NCZip Code
27604Purpose of Disbursement
Non-Federal Canvassing - AZ

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : SB29.43466

Amount of Each Disbursement this Period

11000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Headway Workforce Solutions Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2022

Mailing Address 3100 Smoketree Ct.
Suite 900City
RaleighState
NCZip Code
27604Purpose of Disbursement
Non-Federal Canvassing - FL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C Transaction ID : SB29.43467

Amount of Each Disbursement this Period

18220.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Headway Workforce Solutions Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2022

Mailing Address 3100 Smoketree Ct.
Suite 900City
RaleighState
NCZip Code
27604Purpose of Disbursement
Non-Federal Canvassing - GA

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : SB29.43468

Amount of Each Disbursement this Period

7397.92

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

36618.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 82

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Headway Workforce Solutions Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2022

Mailing Address 3100 Smoketree Ct.
Suite 900City
RaleighState
NCZip Code
27604Purpose of Disbursement
Non-Federal Canvassing - NV

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB29.43469**

Amount of Each Disbursement this Period

1632.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Headway Workforce Solutions Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2022

Mailing Address 3100 Smoketree Ct.
Suite 900City
RaleighState
NCZip Code
27604Purpose of Disbursement
Non-Federal Canvassing - PA

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify)

State: District:

FEC Identification Number

C**Transaction ID : SB29.43470**

Amount of Each Disbursement this Period

19875.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Headway Workforce Solutions Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2022

Mailing Address 3100 Smoketree Ct.
Suite 900City
RaleighState
NCZip Code
27604Purpose of Disbursement
Non-Federal Canvassing - WI

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB29.43471**

Amount of Each Disbursement this Period

4000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

25507.97

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Headway Workforce Solutions Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2022

Mailing Address 3100 Smoketree Ct.
Suite 900City
RaleighState
NCZip Code
27604Purpose of Disbursement
Mileage for Non-Federal Canvassing- AZ

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : SB29.43472

Amount of Each Disbursement this Period

895.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Headway Workforce Solutions Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2022

Mailing Address 3100 Smoketree Ct.
Suite 900City
RaleighState
NCZip Code
27604Purpose of Disbursement
Mileage for Non-Federal Canvassing - FL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify)

State: District:

FEC Identification Number

C Transaction ID : SB29.43473

Amount of Each Disbursement this Period

998.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Headway Workforce Solutions Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2022

Mailing Address 3100 Smoketree Ct.
Suite 900City
RaleighState
NCZip Code
27604Purpose of Disbursement
Mileage for Non-Federal Canvassing - GA

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C Transaction ID : SB29.43474

Amount of Each Disbursement this Period

573.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2466.74

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 44 OF 82

☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Headway Workforce Solutions Inc.

Mailing Address 3100 Smoketree Ct.
Suite 900

City
Raleigh

State
NC

Zip Code
27604

Purpose of Disbursement
Mileage for Non-Federal Canvassing - NV

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
09 / 25 / 2022

FEC Identification Number

C

Transaction ID : SB29.43475

Amount of Each Disbursement this Period

79.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Headway Workforce Solutions Inc.

Mailing Address 3100 Smoketree Ct.
Suite 900

City
Raleigh

State
NC

Zip Code
27604

Purpose of Disbursement
Mileage for Non-Federal Canvassing - PA

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2022
☐ Primary ☒ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
09 / 25 / 2022

FEC Identification Number

C

Transaction ID : SB29.43476

Amount of Each Disbursement this Period

1441.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Headway Workforce Solutions Inc.

Mailing Address 3100 Smoketree Ct.
Suite 900

City
Raleigh

State
NC

Zip Code
27604

Purpose of Disbursement
Mileage for Non-Federal Canvassing - WI

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
09 / 25 / 2022

FEC Identification Number

C

Transaction ID : SB29.43477

Amount of Each Disbursement this Period

388.68

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1909.96

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 OF 82

☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

Full Name (Last, First, Middle Initial)

A. Headway Workforce Solutions Inc.

Mailing Address 3100 Smoketree Ct.
Suite 900

City
Raleigh

State
NC

Zip Code
27604

Purpose of Disbursement
Non-Federal Canvassing - AZ

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 25 / 2022

FEC Identification Number

C

Transaction ID : SB29.43478

Amount of Each Disbursement this Period

4131.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Headway Workforce Solutions Inc.

Mailing Address 3100 Smoketree Ct.
Suite 900

City
Raleigh

State
NC

Zip Code
27604

Purpose of Disbursement
Non-Federal Canvassing - WI

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2022
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 25 / 2022

FEC Identification Number

C

Transaction ID : SB29.43479

Amount of Each Disbursement this Period

245.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

4376.86

TOTAL This Period (last page this line number only)..... ►

155254.53

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 46 OF 82

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.9700

WOMEN SPEAK OUT PAC**LOAN SOURCE** Full Name (Last, First, Middle Initial)
Susan B Anthony List, Inc.☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 2776 S. Arlington Mill Dr.
PO Box 803

City

Arlington

State

VA

ZIP Code

22206

Original Amount of Loan

77452.55

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

77452.55

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 30 / 2017

Date Due

M M / D D / Y Y Y Y
11 / 30 / 2021

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

77452.55

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 47 OF 82

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.13439

WOMEN SPEAK OUT PAC**LOAN SOURCE** Full Name (Last, First, Middle Initial)
Susan B Anthony List, Inc.☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼Mailing Address 2776 S. Arlington Mill Dr.
PO Box 803

City

Arlington

State

VA

ZIP Code

22206

Original Amount of Loan

10118.58

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10118.58

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 30 / 2018

Date Due

M M / D D / Y Y Y Y
11 / 30 / 2022

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10118.58

TOTALS This Period (last page in this line only)..... ►

87571.13

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 48 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

American Marketing & Publishing, Inc.

Nature of Debt (Purpose):

Door Hangers

Mailing Address 2012 Stonewater Ct

City
HoschtonState
GAZip Code
30548

Outstanding Balance Beginning This Period

195750.00

Transaction ID : SD10.43161

Amount Incurred This Period

0.00

Payment This Period

195750.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Campaign HQ

Nature of Debt (Purpose):

Donor Call Minutes Fee

Mailing Address 109 West Front Street

City
BrooklynState
IAZip Code
52211

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.43679

Amount Incurred This Period

56.35

Payment This Period

0.00

Outstanding Balance at Close of This Period

56.35

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Campaign HQ

Nature of Debt (Purpose):

Donor Call Setup Fee

Mailing Address 109 West Front Street

City
BrooklynState
IAZip Code
52211

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.43680

Amount Incurred This Period

2880.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2880.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

2936.35

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 49 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CygnalNature of Debt (Purpose):
Polling-KY

Mailing Address 900 17th St NW

City
WashingtonState
DCZip Code
20006

Outstanding Balance Beginning This Period

13700.00

Transaction ID : SD10.43159

Amount Incurred This Period

0.00

Payment This Period

13700.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Denton US LLPNature of Debt (Purpose):
Legal Fees

Mailing Address 1900 K Street NW

City
WashingtonState
DCZip Code
20006

Outstanding Balance Beginning This Period

15164.00

Transaction ID : SD10.39259

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15164.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Denton US LLPNature of Debt (Purpose):
Legal Fees

Mailing Address 1900 K Street NW

City
WashingtonState
DCZip Code
20006

Outstanding Balance Beginning This Period

2625.00

Transaction ID : SD10.43164

Amount Incurred This Period

0.00

Payment This Period

2625.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

15164.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 50 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Denton US LLP

Nature of Debt (Purpose):

Legal Fee

Mailing Address 1900 K Street NW

City

Washington

State

DC

Zip Code

20006

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.43676

Amount Incurred This Period

10290.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10290.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

EAN Services LLC

Nature of Debt (Purpose):

Travel

Mailing Address PO Box 402383

City

Atlanta

State

GA

Zip Code

30384

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.43677

Amount Incurred This Period

1101.15

Payment This Period

0.00

Outstanding Balance at Close of This Period

1101.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

EAN Services LLC

Nature of Debt (Purpose):

Travel

Mailing Address PO Box 402383

City

Atlanta

State

GA

Zip Code

30384

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.43678

Amount Incurred This Period

1422.12

Payment This Period

0.00

Outstanding Balance at Close of This Period

1422.12

1) **SUBTOTALS** This Period This Page (optional)..... ►

12813.27

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 51 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Evolving Strategies

Nature of Debt (Purpose):

Polling-GA

Mailing Address 3125 1st Place North

City
ArlingtonState
VAZip Code
22201

Outstanding Balance Beginning This Period

48300.00

Transaction ID : SD10.43158

Amount Incurred This Period

0.00

Payment This Period

48300.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Media Bridge

Nature of Debt (Purpose):

Estimate digital ads

Mailing Address 11300 Astarita Ave

City
PartlowState
VAZip Code
22534

Outstanding Balance Beginning This Period

2000.00

Transaction ID : SD10.15740

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Susan B Anthony List, Inc.

Nature of Debt (Purpose):

Existing Loan owed to SBA

Mailing Address 2776 S. Arlington Mill Dr.
PO Box 803City
ArlingtonState
VAZip Code
22206

Outstanding Balance Beginning This Period

10500.00

Transaction ID : SD10.4157

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10500.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

12500.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 52 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Susan B Anthony List, Inc.

Nature of Debt (Purpose):

Loan for FEC Reporting Services

Mailing Address 2776 S. Arlington Mill Dr.
PO Box 803City
ArlingtonState
VAZip Code
22206

Outstanding Balance Beginning This Period

5000.00

Transaction ID : SD10.4110

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Susan B Anthony List, Inc.

Nature of Debt (Purpose):

Mailings Expense

Mailing Address 2776 S. Arlington Mill Dr.
PO Box 803City
ArlingtonState
VAZip Code
22206

Outstanding Balance Beginning This Period

5204.43

Transaction ID : SD10.4318

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5204.43

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Susan B Anthony List, Inc.

Nature of Debt (Purpose):

Original transactions put on SBA CC

Mailing Address 2776 S. Arlington Mill Dr.
PO Box 803City
ArlingtonState
VAZip Code
22206

Outstanding Balance Beginning This Period

8610.00

Transaction ID : SD10.6625

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8610.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

18814.43

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 53 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Susan B Anthony List, Inc.Nature of Debt (Purpose):
Expense put on SBA CCMailing Address 2776 S. Arlington Mill Dr.
PO Box 803City
ArlingtonState
VAZip Code
22206

Outstanding Balance Beginning This Period

4709.73

Transaction ID : SD10.6756

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4709.73

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Susan B Anthony List, Inc.Nature of Debt (Purpose):
To post Thrifty Car Rental Expense put on
SBA CardMailing Address 2776 S. Arlington Mill Dr.
PO Box 803City
ArlingtonState
VAZip Code
22206

Outstanding Balance Beginning This Period

1894.83

Transaction ID : SD10.9222

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1894.83

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Susan B Anthony List, Inc.Nature of Debt (Purpose):
Non-Federal - SuppliesMailing Address 2776 S. Arlington Mill Dr.
PO Box 803City
ArlingtonState
VAZip Code
22206

Outstanding Balance Beginning This Period

200.00

Transaction ID : SD10.15960

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6804.56

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 54 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Susan B Anthony List, Inc.Nature of Debt (Purpose):
Non-Federal - TravelMailing Address 2776 S. Arlington Mill Dr.
PO Box 803City
ArlingtonState
VAZip Code
22206

Outstanding Balance Beginning This Period

27.90

Transaction ID : SD10.15958

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

27.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Susan B Anthony List, Inc.Nature of Debt (Purpose):
Salary / Contractor PayMailing Address 2776 S. Arlington Mill Dr.
PO Box 803City
ArlingtonState
VAZip Code
22206

Outstanding Balance Beginning This Period

4324.16

Transaction ID : SD10.39334

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4324.16

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Susan B Anthony List, Inc.Nature of Debt (Purpose):
Legal FeesMailing Address 2776 S. Arlington Mill Dr.
PO Box 803City
ArlingtonState
VAZip Code
22206

Outstanding Balance Beginning This Period

4950.00

Transaction ID : SD10.41208

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4950.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

9302.06

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 55 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WOMEN SPEAK OUT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Susan B Anthony List, Inc.

Nature of Debt (Purpose):

Mailer Production- Tradewinds See Schedule E

Mailing Address 2776 S. Arlington Mill Dr.
PO Box 803City
ArlingtonState
VAZip Code
22206

Outstanding Balance Beginning This Period

15000.00

Transaction ID : SD10.41901

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Susan B Anthony List, Inc.

Nature of Debt (Purpose):

payroll, travel, rent, IT security, consulting,
database, office suppliesMailing Address 2776 S. Arlington Mill Dr.
PO Box 803City
ArlingtonState
VAZip Code
22206

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.43634

Amount Incurred This Period

61597.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

61597.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Lukens Company

Nature of Debt (Purpose):

Fundraising Mailer

Mailing Address 2800 Shirlington Rd

City
ArlingtonState
VAZip Code
22206

Outstanding Balance Beginning This Period

8391.22

Transaction ID : SD10.43163

Amount Incurred This Period

0.00

Payment This Period

8391.22

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

76597.50

2) **TOTALS** This Period (last page this line number only)..... ►

154932.17

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

87571.13

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

242503.30

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 56 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee American Marketing & Publishing, Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
Mailing Address 2012 Stonewater Ct			Amount 8437.50		
City Hoschton	State GA	Zip Code 30548	Transaction ID : SE.42975		
Purpose of Expenditure Doorhangers		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Name of Federal Candidate: MASTERS, BLAKE, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought 8437.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee American Marketing & Publishing, Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
Mailing Address 2012 Stonewater Ct			Amount 8437.50		
City Hoschton	State GA	Zip Code 30548	Transaction ID : SE.42978		
Purpose of Expenditure Doorhangers		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Name of Federal Candidate: KELLY, MARK, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought 16875.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			16875.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gross, Jennifer, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2022	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 57 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report ▶
New report
Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item American Marketing & Publishing, Inc.			Date of Public Distribution/Dissemination <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">09</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">12</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2022</div> </div>	
Mailing Address 2012 Stonewater Ct				
City Hoschton	State GA	Zip Code 30548	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 8437.50 </div>	
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.42983 Date of Disbursement or Obligation <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">09</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">07</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2022</div> </div>	
Name of Federal Candidate: RUBIO, MARCO, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">8437.50</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item American Marketing & Publishing, Inc.			Date of Public Distribution/Dissemination <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">09</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">12</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2022</div> </div>	
Mailing Address 2012 Stonewater Ct				
City Hoschton	State GA	Zip Code 30548	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 8437.50 </div>	
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	Transaction ID : SE.42984 Date of Disbursement or Obligation <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D /</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">09</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">07</div> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2022</div> </div>	
Name of Federal Candidate: DEMINGS, VAL, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">16875.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	16875.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

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10

20

2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 58 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee American Marketing & Publishing, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 12 / 2022		
Mailing Address 2012 Stonewater Ct			Amount 6750.00		
City Hoschton	State GA	Zip Code 30548	Transaction ID : SE.42990		
Purpose of Expenditure Door Hangers		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 07 / 2022		
Name of Federal Candidate: WALKER, HERSCHEL MR., , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought 6750.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee American Marketing & Publishing, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 12 / 2022		
Mailing Address 2012 Stonewater Ct			Amount 6750.00		
City Hoschton	State GA	Zip Code 30548	Transaction ID : SE.42992		
Purpose of Expenditure Door Hangers		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 07 / 2022		
Name of Federal Candidate: WARNOCK, RAPHAEL, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought 13500.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			13500.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gross, Jennifer, , ,		[Electronically Filed]		Date MM / DD / YYYY 10 / 20 / 2022	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 59 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item American Marketing & Publishing, Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2012 Stonewater Ct			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">13500.00</div>	
City Hoschton	State GA	Zip Code 30548	Transaction ID : SE.42996 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: BUDD, THEODORE P, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">13500.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item American Marketing & Publishing, Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 2012 Stonewater Ct			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">13500.00</div>	
City Hoschton	State GA	Zip Code 30548	Transaction ID : SE.42998 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: BEASLEY, CHERI, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">27000.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	27000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 60 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item American Marketing & Publishing, Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2012 Stonewater Ct			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5062.50</div>	
City Hoschton	State GA	Zip Code 30548	Transaction ID : SE.43002 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: LAXALT, ADAM, , ,			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5062.50</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item American Marketing & Publishing, Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 2012 Stonewater Ct			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5062.50</div>	
City Hoschton	State GA	Zip Code 30548	Transaction ID : SE.43003 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , ,			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">10125.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	10125.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 61 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee American Marketing & Publishing, Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
Mailing Address 2012 Stonewater Ct			Amount 10125.00		
City Hoschton	State GA	Zip Code 30548	Transaction ID : SE.43007		
Purpose of Expenditure Door Hangers		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Name of Federal Candidate: OZ, MEHMET DR, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought 10125.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee American Marketing & Publishing, Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
Mailing Address 2012 Stonewater Ct			Amount 10125.00		
City Hoschton	State GA	Zip Code 30548	Transaction ID : SE.43009		
Purpose of Expenditure Door Hangers		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 07 / 2022		
Name of Federal Candidate: FETTERMAN, JOHN KARL, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought 20250.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			20250.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gross, Jennifer, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2022	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input style="width: 20px;" type="text" value="MM"/> <input style="width: 20px;" type="text" value="MM"/> / <input style="width: 20px;" type="text" value="DD"/> <input style="width: 20px;" type="text" value="DD"/> / <input style="width: 20px;" type="text" value="YYYY"/> <input style="width: 20px;" type="text" value="YYYY"/>	
Full Name of Payee American Marketing & Publishing, Inc.			<input type="checkbox"/> Memo Item		
Mailing Address 2012 Stonewater Ct			Date of Public Distribution/Dissemination <input style="width: 20px;" type="text" value="MM"/> <input style="width: 20px;" type="text" value="MM"/> / <input style="width: 20px;" type="text" value="DD"/> <input style="width: 20px;" type="text" value="DD"/> / <input style="width: 20px;" type="text" value="YYYY"/> <input style="width: 20px;" type="text" value="YYYY"/>		
City Hoschton		State GA	Zip Code 30548	Amount <input style="width: 20px;" type="text" value="09"/> <input style="width: 20px;" type="text" value="12"/> / <input style="width: 20px;" type="text" value="2022"/>	
Purpose of Expenditure Door Hangers			Category/ Type <input style="width: 20px;" type="text" value="004"/>	Transaction ID : SE.43015 Date of Disbursement or Obligation <input style="width: 20px;" type="text" value="MM"/> <input style="width: 20px;" type="text" value="MM"/> / <input style="width: 20px;" type="text" value="DD"/> <input style="width: 20px;" type="text" value="DD"/> / <input style="width: 20px;" type="text" value="YYYY"/> <input style="width: 20px;" type="text" value="YYYY"/>	
Name of Federal Candidate: JOHNSON, RON HAROLD MR., , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <input type="text" value="00"/> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <input type="text" value="WI"/>	
Calendar Year-To-Date Per Election for Office Sought <input style="width: 100px;" type="text" value="3375.00"/>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee American Marketing & Publishing, Inc.			<input type="checkbox"/> Memo Item		
Mailing Address 2012 Stonewater Ct			Date of Public Distribution/Dissemination <input style="width: 20px;" type="text" value="MM"/> <input style="width: 20px;" type="text" value="MM"/> / <input style="width: 20px;" type="text" value="DD"/> <input style="width: 20px;" type="text" value="DD"/> / <input style="width: 20px;" type="text" value="YYYY"/> <input style="width: 20px;" type="text" value="YYYY"/>		
City Hoschton		State GA	Zip Code 30548	Amount <input style="width: 20px;" type="text" value="09"/> <input style="width: 20px;" type="text" value="12"/> / <input style="width: 20px;" type="text" value="2022"/>	
Purpose of Expenditure Door Hangers			Category/ Type <input style="width: 20px;" type="text" value="004"/>	Transaction ID : SE.43016 Date of Disbursement or Obligation <input style="width: 20px;" type="text" value="MM"/> <input style="width: 20px;" type="text" value="MM"/> / <input style="width: 20px;" type="text" value="DD"/> <input style="width: 20px;" type="text" value="DD"/> / <input style="width: 20px;" type="text" value="YYYY"/> <input style="width: 20px;" type="text" value="YYYY"/>	
Name of Federal Candidate: BARNES, MANDELA, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <input type="text" value="00"/> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <input type="text" value="WI"/>	
Calendar Year-To-Date Per Election for Office Sought <input style="width: 100px;" type="text" value="6750.00"/>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				<input style="width: 100px;" type="text" value="6750.00"/>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<input style="width: 100px;" type="text"/>	
(c) TOTAL Independent Expenditures				<input style="width: 100px;" type="text"/>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gross, Jennifer, , , Signature			[Electronically Filed]	Date <input style="width: 20px;" type="text" value="MM"/> <input style="width: 20px;" type="text" value="MM"/> / <input style="width: 20px;" type="text" value="DD"/> <input style="width: 20px;" type="text" value="DD"/> / <input style="width: 20px;" type="text" value="YYYY"/> <input style="width: 20px;" type="text" value="YYYY"/>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5500.00</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43021 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: MASTERS, BLAKE, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">22375.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5500.00</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43022 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: KELLY, MARK, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">27875.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	11000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
Mailing Address 3100 Smoketree Ct. Suite 900			Amount 9110.04		
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43027 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2022		
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)		Category/ Type 004			
Name of Federal Candidate: RUBIO, MARCO, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought		25985.04	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
Mailing Address 3100 Smoketree Ct. Suite 900			Amount 9110.04		
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43028 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2022		
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)		Category/ Type 004			
Name of Federal Candidate: DEMINGS, VAL, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought		35095.08	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			18220.08		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gross, Jennifer, , , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3698.96</div>		
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43031 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: WALKER, HERSCHEL MR., , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: GA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
<div style="border: 1px solid black; padding: 2px; text-align: right;">17198.96</div>					
Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3698.96</div>		
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43032 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: WARNOCK, RAPHAEL, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: GA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
<div style="border: 1px solid black; padding: 2px; text-align: right;">20897.92</div>					
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">7397.92</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gross, Jennifer, , , Signature		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
<div style="border: 1px solid black; padding: 2px; text-align: center;">10</div>		<div style="border: 1px solid black; padding: 2px; text-align: center;">20</div>		<div style="border: 1px solid black; padding: 2px; text-align: center;">2022</div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
Mailing Address 3100 Smoketree Ct. Suite 900			Amount 13157.93		
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43048		
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2022		
Name of Federal Candidate: BUDD, THEODORE P, , ,			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: NC		
Calendar Year-To-Date Per Election for Office Sought 40157.93			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
Mailing Address 3100 Smoketree Ct. Suite 900			Amount 13157.93		
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43049		
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2022		
Name of Federal Candidate: BEASLEY, CHERI, , ,			Office Sought: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President State: NC		
Calendar Year-To-Date Per Election for Office Sought 53315.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			26315.86		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gross, Jennifer, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2022	
Signature					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

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Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">816.03</div>	
City Raleigh	State NC	Zip Code 27604		
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.43052 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Name of Federal Candidate: LAXALT, ADAM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">10941.03</div>		
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">816.03</div>	
City Raleigh	State NC	Zip Code 27604		
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.43053 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">11757.06</div>		
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	▶	1632.06
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Headway Workforce Solutions Inc.			<input type="checkbox"/> Memo Item		
Mailing Address 3100 Smoketree Ct. Suite 900			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
City Raleigh		State NC	Zip Code 27604		Amount 9937.97
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)			Category/Type 004		Transaction ID : SE.43056 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2022
Name of Federal Candidate: OZ, MEHMET DR, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 30187.97			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Headway Workforce Solutions Inc.			<input type="checkbox"/> Memo Item		
Mailing Address 3100 Smoketree Ct. Suite 900			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2022		
City Raleigh		State NC	Zip Code 27604		Amount 9937.97
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)			Category/Type 004		Transaction ID : SE.43059 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2022
Name of Federal Candidate: FETTERMAN, JOHN KARL, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 40125.94			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				19875.94	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gross, Jennifer, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 69 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00530766 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on MM / DD / YYYY	

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 12 / 2022	
Mailing Address 3100 Smoketree Ct. Suite 900		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2000.00</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43062 Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2022
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)		Category/Type 004	
Name of Federal Candidate: JOHNSON, RON HAROLD MR., , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: WI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">8750.00</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 12 / 2022	
Mailing Address 3100 Smoketree Ct. Suite 900		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2000.00</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43063 Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2022
Purpose of Expenditure Canvassing (Estimate reported 9/14/22. This is actual)		Category/Type 004	
Name of Federal Candidate: BARNES, MANDELA, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: WI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">10750.00</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">4000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , , [Electronically Filed]

Signature _____ Date MM / DD / YYYY
 10 / 20 / 2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00530766 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

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Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">447.83</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43067 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: MASTERS, BLAKE, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">28322.83</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">447.82</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43068 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: KELLY, MARK, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">28770.65</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	895.65
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 71 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

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Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">499.05</div>	
City Raleigh	State NC	Zip Code 27604		
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.43071 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Name of Federal Candidate: RUBIO, MARCO, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">35594.13</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">499.05</div>	
City Raleigh	State NC	Zip Code 27604		
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.43072 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Name of Federal Candidate: DEMINGS, VAL, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">36093.18</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	▶	998.10
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

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M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">286.50</div>	
City Raleigh	State NC	Zip Code 27604		
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/Type 004	Transaction ID : SE.43075 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: WALKER, HERSCHEL MR., , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought 21184.42			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">286.50</div>	
City Raleigh	State NC	Zip Code 27604		
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/Type 004	Transaction ID : SE.43076 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: WARNOCK, RAPHAEL, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought 21470.92			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	573.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 73 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

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Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1628.70</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43079 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: BUDD, THEODORE P, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">54944.56</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1628.70</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43080 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: BEASLEY, CHERI, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">56573.26</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;">3257.40</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 74 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">39.68</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43083 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: LAXALT, ADAM, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">11796.74</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">39.67</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43084 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/ Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: CORTEZ MASTO, CATHERINE, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">11836.41</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	79.35
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 75 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">720.98</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43087 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate: OZ, MEHMET DR, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">40846.92</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">720.98</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.43088 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	<div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate: FETTERMAN, JOHN KARL, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">41567.90</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	1441.96
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 76 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">194.34</div>	
City Raleigh	State NC	Zip Code 27604		
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: JOHNSON, RON HAROLD MR., , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WI	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">194.34</div>	
City Raleigh	State NC	Zip Code 27604		
Purpose of Expenditure Mileage (Estimate reported 9/14/22. This is actual)		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: BARNES, MANDELA, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WI	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	388.68
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 77 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Headway Workforce Solutions Inc.			<input type="checkbox"/> Memo Item		
Mailing Address 3100 Smoketree Ct. Suite 900			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 28 / 2022		
City Raleigh		State NC	Zip Code 27604	Amount 2065.58	
Purpose of Expenditure Canvassing (Estimate reported 9/30/22. This is actual)			Category/ Type 004	Transaction ID : SE.43183 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2022	
Name of Federal Candidate: MASTERS, BLAKE, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought 30836.23			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Headway Workforce Solutions Inc.			<input type="checkbox"/> Memo Item		
Mailing Address 3100 Smoketree Ct. Suite 900			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 28 / 2022		
City Raleigh		State NC	Zip Code 27604	Amount 2065.58	
Purpose of Expenditure Canvassing (Estimate reported 9/30/22. This is actual)			Category/ Type 004	Transaction ID : SE.43185 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2022	
Name of Federal Candidate: KELLY, MARK, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought 32901.81			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				4131.16	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gross, Jennifer, , , Signature			[Electronically Filed]	Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 78 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Headway Workforce Solutions Inc.			<input type="checkbox"/> Memo Item		
Mailing Address 3100 Smoketree Ct. Suite 900			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 28 / 2022		
City Raleigh		State NC	Zip Code 27604	Amount 0.00	
Purpose of Expenditure Canvassing (Estimate reported 9/30/22. This is actual)			Category/Type 004	Transaction ID : SE.43188 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2022	
Name of Federal Candidate: WALKER, HERSCHEL MR., , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought			21470.92	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Headway Workforce Solutions Inc.			<input type="checkbox"/> Memo Item		
Mailing Address 3100 Smoketree Ct. Suite 900			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 28 / 2022		
City Raleigh		State NC	Zip Code 27604	Amount 0.00	
Purpose of Expenditure Canvassing (Estimate reported 9/30/22. This is actual)			Category/Type 	Transaction ID : SE.43190 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 25 / 2022	
Name of Federal Candidate: WARNOCK, RAPHAEL, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought			21470.92	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gross, Jennifer, , , Signature			[Electronically Filed]	Date M M / D D / Y Y Y Y Y Y 10 / 20 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 79 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

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D D /

Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">28</div> <div style="border: 1px solid black; padding: 2px;">2022</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 0.00 </div>	
City Raleigh	State NC	Zip Code 27604		
Purpose of Expenditure Canvassing (Estimate reported 9/30/22. This is actual)		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.43193 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2022</div> </div>	
Name of Federal Candidate: OZ, MEHMET DR, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">41567.90</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Headway Workforce Solutions Inc.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">28</div> <div style="border: 1px solid black; padding: 2px;">2022</div> </div>	
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 0.00 </div>	
City Raleigh	State NC	Zip Code 27604		
Purpose of Expenditure Canvassing (Estimate reported 9/30/22. This is actual)		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.43195 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">09</div> <div style="border: 1px solid black; padding: 2px;">25</div> <div style="border: 1px solid black; padding: 2px;">2022</div> </div>	
Name of Federal Candidate: FETTERMAN, JOHN KARL, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">41567.90</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

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2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 81 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ C C00530766
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 Check if ☐ 24-hour report ☐ 48-hour report ☒ New report Amends report filed on / /

Full Name of Payee Headway Workforce Solutions Inc. <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <input type="text"/> 0.00 Transaction ID : SE.43202 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Raleigh	State NC	Zip Code 27604	
Purpose of Expenditure Mileage (Estimate reported 9/30/22. This is actual)		Category/ Type <input type="text"/> 004	
Name of Federal Candidate: MASTERS, BLAKE, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/> 32901.81	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Headway Workforce Solutions Inc. <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 3100 Smoketree Ct. Suite 900			Amount <input type="text"/> 0.00 Transaction ID : SE.43204 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Raleigh	State NC	Zip Code 27604	
Purpose of Expenditure Mileage (Estimate reported 9/30/22. This is actual)		Category/ Type <input type="text"/> 004	
Name of Federal Candidate: KELLY, MARK, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/> 32901.81	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

 / /
 10 / 20 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 82 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY	

Full Name of Payee <input type="checkbox"/> Memo Item OnMessage Inc.	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY 09 / 26 / 2022 </div>						
Mailing Address 705 Melvin Ave #105	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 999979.28 </div>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border-bottom: 1px solid black;">City</td> <td style="width: 33%; border-bottom: 1px solid black;">State</td> <td style="width: 33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td>Annapolis</td> <td>MD</td> <td>21401</td> </tr> </table>		City	State	Zip Code	Annapolis	MD	21401
City		State	Zip Code				
Annapolis	MD	21401					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; border-bottom: 1px solid black;">Purpose of Expenditure</td> <td style="width: 50%; border-bottom: 1px solid black;">Category/Type</td> </tr> <tr> <td>Digital Ads - Placement and Production</td> <td>004</td> </tr> </table>	Purpose of Expenditure	Category/Type	Digital Ads - Placement and Production	004			
Purpose of Expenditure	Category/Type						
Digital Ads - Placement and Production	004						
Name of Federal Candidate: <input checked="" type="checkbox"/> Support MASTERS, BLAKE, , , <input type="checkbox"/> Oppose							
Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ							
Calendar Year-To-Date Per Election for Office Sought 532881.09							
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶							

Full Name of Payee <input type="checkbox"/> Memo Item OnMessage Inc.	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> MM / DD / YYYY 09 / 26 / 2022 </div>						
Mailing Address 705 Melvin Ave #105	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 499979.28 </div>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border-bottom: 1px solid black;">City</td> <td style="width: 33%; border-bottom: 1px solid black;">State</td> <td style="width: 33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td>Annapolis</td> <td>MD</td> <td>21401</td> </tr> </table>		City	State	Zip Code	Annapolis	MD	21401
City		State	Zip Code				
Annapolis	MD	21401					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; border-bottom: 1px solid black;">Purpose of Expenditure</td> <td style="width: 50%; border-bottom: 1px solid black;">Category/Type</td> </tr> <tr> <td>Digital Ads - Placement and Production</td> <td>004</td> </tr> </table>	Purpose of Expenditure	Category/Type	Digital Ads - Placement and Production	004			
Purpose of Expenditure	Category/Type						
Digital Ads - Placement and Production	004						
Name of Federal Candidate: <input type="checkbox"/> Support KELLY, MARK, , , <input checked="" type="checkbox"/> Oppose							
Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ							
Calendar Year-To-Date Per Election for Office Sought 1032860.37							
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶							

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 999958.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> 1211786.40 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 20 / 2022

Signature